



State of New Hampshire 2014 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 04/01/2014

Business ID: 626605

William M. Gardner

Secretary of State

VILLAGE SHOPS ICH, LLC

PO BOX 127

LINCOLN, NH 03251

ADDRESS OF PRINCIPAL OFFICE:

PO BOX 127

LINCOLN, NH 03251

REGISTERED AGENT AND OFFICE:

BURGER, PETER F, ESQ

1 EAGLE SQUARE

CONCORD, NH 03301

ENTITY TYPE: LLC

BUSINESS ID: 626605

STATE OF DOMICILE: NEW HAMPSHIRE

REAL ESTATE SERVICES

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

A

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

B

MEMB. John Imbrescia

STREET 346 Congress St. Unit #610

CITY/STATE/ZIP Boston Ma 02210

MEMB. Marcia Imbrescia

STREET 346 Congress St. Unit #610

CITY/STATE/ZIP Boston Ma 02210

MEMB. Allan Huntley

STREET 11 Thornton Circle

CITY/STATE/ZIP Middleton Ma 01949

MEMB. Tim Connolly

STREET 200 Cliff Road

CITY/STATE/ZIP Wellesley Ma 02481

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Marcia Imbrescia

Please print name and title of signer:

Marcia Imbrescia

/

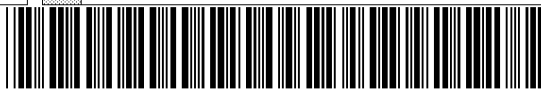
MEMBER

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



062660520141003

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

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